



TEXAS DEPARTMENT OF HEALTH
AUSTIN TEXAS
INTER-OFFICE

02-039

THRU: Regional Directors
Directors, Local Health Departments
Directors, Independent WIC Local Agencies
Director, Office of Public Health Practice

TO: WIC Directors

FROM: Barbara Keir, Director "ORIGINAL SIGNED"
Division of Public Health Nutrition and Education
Bureau of Nutrition Services

DATE: April 2, 2002

SUBJECT: Revised Formula Conference Call in April

This is the revised formula conference call scheduled for April 23, 2002, from 10:00 – 11:30 a.m. and from 12:00 – 1:30 p.m. The attachments that were posted with the memo were incorrect. This memo supersedes memo #02-037, dated March 29, 2002.

The purpose of this conference call is to introduce the new nutrition education pamphlet, "Feeding Your Premature Baby Step by Step." This pamphlet emphasizes using corrected age for feeding advancement during the first year of life for the infant who was born prematurely. This pamphlet should only be used in individual counseling sessions with caretakers of premature infants because the counseling needs to be individualized. A copy of this pamphlet and other tools to be used for the conference call are enclosed. Additional copies of the pamphlet can be ordered from the warehouse and are available in both English and Spanish. Roxanne Robison, CSHCN Nutrition Consultant, will also present this training at the Nutrition/Breastfeeding Conference on April 4, 2002. Staff who provide individual counseling and who are unable to attend the session at the Nutrition/Breastfeeding Conference, are urged to be a part of the conference call on April 23, 2002.

To connect to the conference call on April 23, dial (512) 463-1928. Then enter: 1501518# don't forget to enter the pound sign at the end.

Projects # 1 - 53 Assigned to 10:00 - 11:30 a.m. time slot
Projects #54 -106 Assigned to 12:00 – 1:30 p.m. time slot

If this time interferes with local agency plans, please let us know and we will move you to the other time slot. We are limited in the numbers for each time slot, so please let us know as soon as possible. If you have any questions, please feel free to contact Roxanne Robison, Children with Special Health Care Needs Nutrition Consultant at (512) 458-7111 extension 3495, or Patti Fitch, Clinical Nutrition Coordinator at (512) 458-7111 extension 3598. You may order tapes from Kathy Giarratano at (512) 458-7111 extension 2126.

Attachments

Table 6-1: Developmental Sequence of Oral-Motor and Self-Feeding Skills

Age	Reflexes	Jaws and Cheeks	Lips	Tongue	Swallowing	Self-Feeding
Term to 1 month	<ul style="list-style-type: none">• Palmoventral• Rooting• Gag• Phasic bite	<ul style="list-style-type: none">• Fat pad present• Primary jaw movement downward during sucking	<ul style="list-style-type: none">• Upper lip exerts more pressure than lower in sucking• No lateral lip closure• Lips closed at rest	<ul style="list-style-type: none">• Fills oral cavity• Provides compression and suction during sucking	<ul style="list-style-type: none">• Suck-swallow sequence 1:1 at start of feed; 2-3:1 toward end of feed• Air swallow common	<ul style="list-style-type: none">• Hand-to-mouth activity
1-2 months	See above	<ul style="list-style-type: none">• Fat pad thinning	<ul style="list-style-type: none">• Lateral borders close on nipple			<ul style="list-style-type: none">• Expects feeding at regular intervals
3-4 months	<ul style="list-style-type: none">• Palmoventral and phasic bite disappearing	<ul style="list-style-type: none">• Buccal cavity begins to develop	<ul style="list-style-type: none">• Smacks lips• Protrudes lips to surround nipple	<ul style="list-style-type: none">• Tongue protrudes in anticipation of feeding or if nipple touches lip• Ejects food voluntarily	<ul style="list-style-type: none">• Visual recognition of nipple• Pats bottle or breast• Can voluntarily inhibit suck to look or listen	
5-6 months	<ul style="list-style-type: none">• Rooting begins to diminish• Gag elicited farther back in mouth	<ul style="list-style-type: none">• Buccal cavity developed• Up and down munching and biting• Inner cheeks draw inward during eating• Positions mouth for spoon	<ul style="list-style-type: none">• Draws in lower lip when spoon removed• Upper lip active in cleaning food from spoon• Purse lips at corners	<ul style="list-style-type: none">• Tongue moves in up and down manner with pureed foods; no lateralization• Tongue still in anticipation of food• Tongue protrudes before swallow	<ul style="list-style-type: none">• Choking rare on breast or bottle• One sip at a time from a cup• No gagging on pureed food	<ul style="list-style-type: none">• Begins finger feeding• Plays with spoon

Age	Reflexes	Jaws and Cheeks	Lips	Tongue	Swallowing	Self-Feeding
7-8 months	<ul style="list-style-type: none"> • Mature gag 	<ul style="list-style-type: none"> • Munching continues • Jaw closes on solid then sucks it • Jaw held closed while a piece of soft solid is broken off 	<ul style="list-style-type: none"> • Blows "raspberries" • Upper lip moves downward and forward to actively clean spoon 	<ul style="list-style-type: none"> • Tongue begins lateral shift when food is at side of mouth 	<ul style="list-style-type: none"> • Does not gag on ground foods or soft semisolids 	<ul style="list-style-type: none"> • Feeds self cracker • May hold bottle
9 months		<ul style="list-style-type: none"> • Munches with diagonal movements as food is transferred from center to sides • Voluntary biting on food and objects 	<ul style="list-style-type: none"> • Lips active with jaw during chewing • Briefly closes lips on cup rim 	<ul style="list-style-type: none"> • Lateral movements to transfer food from center to sides of mouth 	<ul style="list-style-type: none"> • Drinking from cup • Takes 1-3 sucks before stopping to swallow and breathe 	<ul style="list-style-type: none"> • More precise finger feeding • Reaches for spoon, may insert crudely in mouth
12 months		<ul style="list-style-type: none"> • Controlled, sustained bite on soft cookie • Begins rotary chewing movements 	<ul style="list-style-type: none"> • Lips closed during swallow with no food or liquid loss • Lower lip is drawn inward to be cleaned by upper gums 	<ul style="list-style-type: none"> • Lateralizes from center to sides • Licks food from lower lip • Intermittent tongue tip elevation 	<ul style="list-style-type: none"> • Taking increased amount of liquids from cup • Takes 4-5 continuous swallows • Swallows ground, mashed or chopped table foods without gagging 	<ul style="list-style-type: none"> • Finger feeds independently • Holds and lifts cup but has spillage • Brings spoon to mouth but inverts spoon before mouth • Fills spoon poorly

Adjusting an Infant's Age for Premature Birth

An infant born at this many weeks gestation	Was born this many weeks early	Or this many months early	Which can be rounded to this many months
36	4	1	1
35	5	1.25	1
34	6	1.5	2
33	7	1.62	2
32	8	1.86	2
31	9	2	2
30	10	2.32	2
29	11	2.55	3
28	12	2.79	3
27	13	3	3
26	14	3.25	3
25	15	3.49	4
24	16	3.72	4
23	17	3.95	4

Instructions for Counseling With the Pamphlet, “Feeding Your Preterm Baby Step by Step”

Example:

Mom tells you her infant was born at “27 weeks”.

You will need to have the pamphlet, *Feeding Your Preterm Baby Step by Step* and the handout, *Adjusting an Infant’s Age for Premature Birth*

1. Looking at the handout, “Adjusting an Infant’s Age for Premature Birth”, you see that in infant born at 27 weeks gestation was born 13 weeks early (40 weeks for a term infant – 27 weeks of actual gestation). According to the handout, 13 weeks early is the same as 3 months premature.

Note: (this is determined by 4.3 weeks per month or 52 weeks in a year divided by 12 months = 4.3)

2. Now, look at the pamphlet and begin to fill in the blanks under the, “When your baby is” column. In this example, you would start with “3” months since this baby was born 3 months early.
3. On the first box only, add 3 months to the first number you just filled in so that it would read “3 to 6 months old”.
4. In the next box, start with the next consecutive number, in this case it would be 7. Then add 2 months, so that it reads, “ 7 to 9 months old”. The next box would read, “10 to 12 months old”, etc.
5. Now, determine the baby’s **chronological age**. This can be done by looking at a calendar and counting the number of weeks, or by the following example:

Today’s date:	02	02	07	(February 7, 2002)
Birth Date:	-	01	07	24 (July 24, 2001)
Chronological age			06	13 (6 ½ months old)

6. In this example, the baby is 6 ½ months old. So, you would begin counseling the mother using the first row across the top (since he has not yet completed his 6th month of chronological age). He is the corrected age of a birth to 3-month-old infant.
7. Remember, not all preterm infant develop at the same rate so always ask the caretaker questions from the, “When he does this” column to determine what developmental level the baby is currently at. In this example, since the baby is 6 ½ month old, you should ask, “Can your baby sit with help?” etc, etc...

Let's Take Another Example

Mom tells you her baby was born at 25 weeks gestation.

1. How many weeks early was this baby born?
 2. How many months? (Always use the rounded column)
 3. See if you can fill in the blanks on the pamphlet, "Feeding Your Preterm Baby Step by Step".
 4. Determine the baby's chronological age if the baby was born on 7-25-00 and today's date is 4-05-01.
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5. How would you counsel this mother regarding feeding her baby?